immediately available upon removal of the top sheet **24**, the healthcare provider can immediately open the package **28** and prepare the patient's skin. This will allow the skin-preparation solution on it to begin drying while the healthcare provider continues to set up the remaining items in kit **10** for administration to the patient.

[**0027**] Referring now to **FIG. 3**, the preparation of other components of kit **10** are shown by an assembly schematic. To go from the kit as shown in **FIG. 2** to the kit as shown in **FIG. 3**, the following steps have been carried out: the skin preparation package **28** has been removed and holding, or packaging, towel **30** has been unfolded and in this particular figure removed with all of its contents likewise removed but shown outside of the package.

[**0028**] The interior tray or subtray **32** rests inside the outer tray **12** and on the packaging towel **30** when the kit **10** is in its packaged position. Subtray **32** is, for example, a blown plastic tray with molded compartments to hold each of the components, such as needles and cup **34**, in a secure position while waiting for kit **10** to be used. As one specific example, the rounded sealed cup **34** corresponds with the round receiving compartment **36** in subtray **32**, and thereby, is held secure during transportation and storage. In a similar fashion, the other components that are at risk of moving or being damaged in some way during transport and storage have compartments designed to hold them secure.

[**0029**] The subtray **32** holds a preloaded syringe with local anesthetic **38** that has a corresponding hypodermic needle **40**. To facilitate quick identification of the local anesthetic syringe **38**, the needle **40** may already be attached, but an additional turn of the needle may be required to break a seal. Of course, an epidural needle **42** is provided and is shown in its covering. An epidural syringe **44** is included. An epidural catheter in its package **46** is provided. As previously mentioned, a sealed cup **34**, which in this embodiment contains saline, is provided. Cup **34** will be described in more detail in connection with **FIG. 4**. A syringe **48** that is pre-loaded or pre-filled with a test dose of a test fluid (e.g., local anesthesia with epinephrine) is provided. An initial epidural anesthesia load is in pre-loaded syringe **50**. In addition, while not explicitly shown, there are a variety of needles that may be used with syringes **48** and **50**. The kit **10** may include additional items such as a label **52**, which makes it clear that the catheter should only be used for epidural anesthesia; a gauze **54**; additional syringes; and a securing bandage **56**. In addition, a roll of tape for securing the catheter to the patient may also be provided. With respect to bandage **56**, it is desirable to secure the catheter **46** in place, but to also provide the ability conveniently to observe the site where the catheter enters the patient, and this can be done by using a clear bandage such as a BIOCLUSIVE® bandage from Johnson & Johnson Medical of Arlington, Tex. (see U.S. Pat. No. 4,614,183, which is incorporated by reference for all purposes).

[**0030**] Each item either rests in its respective compartment in subtray **32** or on top of subtray **32**. Subtray **32** is placed on top of an interior portion of towel **30** that is placed into an interior of the outer tray **12**. A drape **58** and one or more additional towels **60** may be placed on top of subtray **32**. The towel **30** may then be folded closed and the skin-preparation package **28** placed on top of the towel before the top-sealing sheet **24** is applied and sealed. It some instances it may be desirable to secure the skin-preparation package **28** to the towel **30** using an adhesive or tape or other means. Also, in an alternative embodiment, the skin-preparation package could be sealed and removeably attached to an exterior of the sealing sheeting **24**. Either way, the skin-preparation package should be accessible without requiring towel **30** to be unfolded.

[**0031**] Referring to **FIG. 4, a** solution is provided in a plastic container or cup **34** that preferably has circular sidewalls **62** and a removable lid **64**. Cup **34** could take other shapes. The overall shape of cup **34** is, preferably, similar to a salad-dressing container used on many commercial airliners. Lid **64** preferably has a tab portion **66**, and when it is desirable to use the fluid in cup **34**, tab **66** is pulled by the healthcare provider using his or her fingers to remove or partially remove the top **64** to allow access to the fluid in cup **34**. Cup **34** could also have a screw off cap in an alternative embodiment. In the case of a preferred epidural kit, cup **34** holds a saline solution. In some applications, cup **34** might hold any injectable fluid, e.g., heprinized saline, sterile water, dye, radio opaque substances, a test dose such as a local anesthesia with Epinephrine, and anesthesia. Furthermore, a plurality of cups **34** might be included in a kit **10**—each with a different injectable fluid. In the latter situation, the cups **34** allows these fluids to be quickly loaded-again without having to break open any vials and without necessarily requiring a needle to be attached.

[**0032**] With reference to FIGS. **1-4**, one illustrative method of using kit **10** is now described. Beginning with a prepared kit **10** as in **FIG. 1**, the kit **10** is placed out on a surface and the top-sealing sheet **24** is removed. With the patient in the proper position, the skin preparation package **28** is opened and the skin preparation solution is used to prepare the patient's skin in the area that is to be punctured. While the skin-preparation solution dries or remains for a prescribed period of time on the patient, the towel **30** is unfolded exposing the interior contents of tray **12**. Preloaded syringe **38** is obtained and, if not already attached, needle **40** is attached to it. Syringe **38** is prefilled with a local anesthesia (e.g., Bupivacaine, Ropivacaine, Lidocaine, 2-Chloroprocaine, etc.). The local anesthesia is then administered to the patient.

[**0033**] If a saline solution is desired to be used for tactile feedback in the loss-of-resistance technique, the epidural syringe **44** is filled with saline from cup **34**, which has had the lid **64** pulled back. The epidural needle **42** is attached to the syringe **44**. The healthcare provider places the epidural needle into the epidural space of the patient using proper techniques and precautions, and then syringe **44** may be removed and catheter package **46** opened and applied into needle **42**. Once the catheter is in place, a preloaded syringe **48** may be used with the catheter to administer a test dose (e.g., local anesthetic with epinephrine). Once the test dose has been administered and the healthcare provider is satisfied that the epidural needle **42** is in its proper location, a preloaded load of epidural anesthesia may be administered by using preloaded syringe **50**.

[**0034**] Once catheter **46** is in place, the catheter **46** may be secured by using adhesive bandage **56**. Label **52** may be used to appropriately label the epidural catheter. Tape may be used to further secure the catheter **46** to the patient. The catheter **46** may be attached to proper equipment to provide a continuous epidural if desired.